PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
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		-	-	SONS ARE REQUIRED TO RE			T	unless it dispolication or			ontrol number.
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA	LL E	YTITY	OR	OTHER T	
FOR NUMBER			ER FILED	ILED NUMBER EXTRA		RA	TE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))								\$	OR		270
TOTAL CLAIMS (37 CFR 1.16(c))			2 minu	ıs 20 = <b>*</b>	þ	x \$			OR	x \$ =	7
INDEPENDENT CLAIMS (37 CFR 1.16(b))			3 min	us 3 = *		x	_=		OR	x =	1110
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+	_		OR	+ =	100
♣ If the difference in column 1 is less then zero, enter "0" in column 2							'AL		OR	TOTAL	7//
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	LL E	YTITY	OR	OTHER T SMALL E	1
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ГЕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	128	Minus	** 26	= 2	x \$_	_=		OR.	x \$=	36A
	Independent (37 CFR 1.16(b))	* 4	Minus	*** 2	= ,	x _	=		OR	x=	S/nA
Α		ENTATION OF MI	ULTIPLE DEI	PENDENT CLAIM	(37 CFR 1.16(d))		=		OR OR	+ =	1
	(Column 1) (Column 2) (Column 3)					TOT ADDIT. F			OR	TOTAL DDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA'		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=	_=	OR	OR	x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=		OR OR	x =	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR					<b> </b>	_=		OR	+=	
(Column 1) (Column 2				(Column 2)	(Column 3)	TO ADDIT.	TAL FEE		ORA	TOTAL DDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(e))	*	Minus	**	=	x \$	_=		OR	x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=		OR OR	x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1 -	_=		OR	+=	
	Cabo enter != - 1	TO ADDIT	DTAL		OR	TOTAL					
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".								• •	ADDIT. FEE	